



A FEW WORDS  
ON  
THE SURGICAL TREATMENT  
OF  
THE CASE OF THE LATE SIR ROBERT PEEL.

BY A COUNTRY SURGEON.

It is with unfeigned reluctance, and in obedience alone to an imperative sense of duty, that, while expressing our deep and heartfelt regret at the calamitous death of England's great statesman, we feel compelled to comment upon the singular course of *treatment*—if, indeed, the facts of the case can be said to warrant the use of the term—resorted to by the medical and surgical attendants of the late Sir Robert Peel.

The very first step taken after the occurrence of the unfortunate accident, viz., the conveyance of the patient to his own residence, in a carriage, was injudicious in the extreme. The accident had happened in the immediate vicinity of St. George's Hospital, and the most natural and rational course of proceeding would have been to procure a stretcher-bed from that hospital, and to carry the patient *instantly* to the accident ward, where the extent of the injuries received might have been readily ascertained, and the proper treatment resorted to, before the return of consciousness and sensibility could have interfered with the necessary manipulations.

Had the accident happened to a man in a humble station of life, this simple and obvious course of proceeding would have been adopted without the slightest hesitation, and the life of the patient would most probably have been saved thereby. But in this instance, it appears that the lamented baronet was made to pay the penalty of his rank and position. The hospital could not be thought of for a man of Sir Robert Peel's station, and so Dr. Foucart, with whom rests, of course, the entire blame and onus of *this* part of the proceedings, thought proper to advise his immediate removal to his private residence in a carriage, without endeavouring even to ascertain first whether the nature of the injuries received by the fall would permit the employment of this mode of conveyance with perfect safety to the patient. We feel tempted here to ask Dr. Foucart, whether he would have advised removal in a carriage, had he known at the

time that a comminuted fracture of the clavicle existed? We should imagine, not.—However, a carriage having been procured, the unfortunate sufferer was lifted up and hoisted into it. Now, it is not at all unlikely that in the performance of this act and of the subsequent one of lifting Sir Robert out of the carriage, the hands of one of the gentlemen assisting in it may have pressed heavily against the ribs, more particularly in the region of the 4th, 5th, and 6th, and that the broken ends of the fifth rib on the left side, which *after death* was ascertained to be fractured, may thus have been actually forced down upon the lung. The attempt which Sir Robert made in the carriage to raise himself up, *and which it was thought necessary to prevent*, was probably prompted by a species of instinctive impulse to free himself from the grasp of his injudicious supporters. We are told that, on being lifted out of the carriage, Sir Robert revived, *and walked, with assistance into the house*. The same gentlemen then, Sir James Clark and Dr. Foucart, who had deemed it necessary to interfere with Sir Robert's endeavour to raise himself up, seem to have acquiesced afterwards in his attempt to walk and to ascend the steps leading to the door of his mansion. Their acquiescence in this suffices to prove that at the time, they could not have even the most remote notion of the nature of the injuries received by their illustrious patient, which every step taken up to this time could only tend to aggravate. At last, after a most painful meeting between Sir Robert and his wife and family, which, under the circumstances, it would have been the wisest course to prevent since it could hardly be expected to produce any but an unfavourable effect upon a patient of Sir Robert's sensitive organization, we find the unfortunate sufferer deposited on a sofa in the dining-room of his mansion, and surrounded by six physicians and surgeons, most of them of the highest professional reputation.

Now, one would have thought that in the hands of men like Sir Benjamin



Brodie, Mr. Cæsar Hawkins, Mr. Hodgson, and Dr. Seymour, at all events the nature of the injuries would be ascertained to a sufficient extent to lead to the adoption of an appropriate mode of treatment. Yet in the authentic and avowedly official report of the case which appeared in the *Times*, of July 4th, we are told that "a formidable difficulty presented itself at the very outset of the case, from the distressing fact that Sir Robert's sufferings were so acute that he would not permit any minute examination of his injuries to be made by the medical men. The slightest touch in the vicinity of the injured parts gave him intense agony, and *the only manner in which he could be treated under the circumstances was to assume that the comminuted fracture of the clavicle* (which was evident to the eye on the clothes being removed) *was the only one, and that the ribs were uninjured.*" Now, considering that Sir Robert complained of suffering the greatest and most acute pain in the region of the fifth and sixth ribs on the left side this must surely be regarded as rather a strange conclusion to arrive at.

In a very interesting clinical lecture recently delivered, at Guy's Hospital, by Mr. Hilton, on the subject of fracture of the ribs, that gentleman gives the excellent advice to surgeons, in all doubtful or obscure cases of injury of the ribs, to give the benefit of the doubt to the patient, and to treat the case as if fracture really existed. Had this been done in Sir Robert Peel's case, perhaps the country would not now have to mourn the loss of that illustrious man.

But, it seems, that even with the fracture of the clavicle, Sir Robert's professional attendants did not deal in a decided manner; since we learn, from the same report in the *Times*, that "after the consultation it was determined to reduce the fracture, but, owing to the extreme sensibility of the patient, the operation was not completely performed; and, at the expiration of a few hours, the sufferer entreated that he might be released from the bandages, and they were accordingly taken off."

As to the general treatment of the case, there seems to have been none whatsoever. The medical attendants seem to have contented themselves with watching the sad progress of Sir Robert's agony. Well may Mr. Langley\* ask why the most vigorous and copious

depletion was not immediately resorted to, as the only determinate mode of controlling the circulation, and restraining the inflammatory action which might naturally be expected to ensue after such serious injuries as Sir Robert Peel had suffered. From the report in the *Times* we learn that, about thirty hours after the accident, when it had become apparent to Sir Robert's medical advisers that the consequences of the accident were of a much more serious and alarming nature than they had originally felt inclined to consider them to be; and that when the pulse had increased to 110-120, some weak and inefficient attempt was made to reduce the inflammation, which, by that time, had gained a formidable hold upon the system. We are told that twenty leeches were applied to the left shoulder by Dr. Foucart, but that this produced no improvement in the condition of the patient. Of course not. How could any serious and positive improvement be expected to result from so effete a measure. Why, the most vigorous depletion, both general and local, would probably have failed, at that stage, to arrest the progress of the inflammatory action.

After the failure of this miserably inefficient operation, it appears nothing whatsoever was done by the professional attendants of the sufferer to check the advance of the approaching catastrophe.

The report in the *Times* tells us that "medicine was administered as a matter of course;" and we will charitably assume that the medicine administered, was of a nature suited to the circumstances of the case, and that it was not entirely left to the patient to take or refuse it as he listed. But what beneficial effect could possibly result from even the most appropriate course of medication, with a broken rib pressing upon the lung, and a most formidable inflammation raging, unchecked, in a vital part of the system?

Thus Sunday night, and Monday passed, the patient continuing throughout in a very precarious state, which on Monday night became at last positively alarming. At about four o'clock on Tuesday morning, however, he fell into a sound sleep, in which he continued uninterruptedly until eight o'clock. When he awoke from this sleep, his medical attendants considered him much refreshed by the rest which he had enjoyed. Yet, notwithstanding, no advantage was taken of this favourable turn, to endeavour to ascertain

\* *Lancet*, July 13th, p. 63.



to some extent the actual seat of the injury, which had given rise to such formidable symptoms, and which could hardly be thought to reside in the clavicle or shoulder. Nor appears there to have been made any serious attempt to administer some sustenance to the system. We are told that "from the period of the accident, up to Tuesday morning, at eight o'clock, (nearly seventy hours,) Sir Robert had taken no other sustenance than a glass of champagne, and the yolk of one egg, beaten up, which he was induced with some difficulty to swallow, and that throughout the same lengthened period the system had remained perfectly inactive."

Sir Robert had met with his fatal accident under peculiarly unfortunate circumstances.

For a week or two before the accident he had looked unusually pale and languid. For two nights previous to the lamentable occurrence, on Thursday and Friday, he had been unable to retire to rest before half-past four or five o'clock in the morning; on Friday night he had taken a leading part in one of the most important and exciting debates of the session, and had delivered one of the most masterly and brilliant speeches on the foreign policy of the government. The excitement with which the delivery of such a speech must necessarily have been attended in a man of Sir Robert's physical and mental organization, would probably continue in full force for several hours after, and thus prevent him from enjoying even a short slumber in the morning. Sir Robert was accordingly in the very worst condition to resist the consequences of the formidable accident he met with on the afternoon of Saturday. Moreover, Sir Robert had not dined at the time, and had, most probably, partaken of a slight luncheon only, a circumstance which, in our opinion, would have been favourable indeed to a copious depletion, resorted to *immediately*, or, at all events, *soon* after the accident; but which, in the absence of such a depletion, would necessarily tend to aggravate the consequences, by leaving the whole mass of the blood, as it were, at the free and unrestricted disposal of the injured parts. Under such circumstances we can readily conceive, that Sir Robert's medical attendants should have thought that, notwithstanding the refreshing sleep which Sir Robert had enjoyed on Tuesday morning, there remained still "cause for intense anxiety." What we can really

not conceive is, that they should have allowed every opportunity that might seem to afford a glimpse of hope to pass by without a single effort to save their illustrious patient by any exertion of their own. A committee of Homœopaths, under the guidance of a Hahnemann, Des Guidi, or Currie, could not have acted in a more decided spirit of *far niente*; they, at all events, would have made their patient partake of some sustenance.

At noon on Tuesday, the report in the *Times* proceeds:—"Sir Robert expressed himself easier. This relief was unhappily of short duration. At two o'clock far more dangerous symptoms than any which had yet been observed presented themselves. At this time Sir Robert began to breathe stertorously, and his reason again failed him. He ceased to answer any of the questions addressed to him, and appeared to be sinking into a comatose state. Sir Benjamin Brodie was again sent for, and on his arrival agreed with Dr. Foucart and the other medical gentlemen, that the case now assumed a most dangerous aspect. The pulse had become very weak, and marked 118." Thus it would appear that up to this time the professional attendants of Sir Robert were not fully aware of the serious nature of the case which they had undertaken to treat. They seem to have entertained, almost throughout, some strange and fatal delusion of an approaching favourable crisis. Ample proofs of this fact may be collected from the bulletins issued from time to time by them, and in which every, even the most trifling and merely apparent improvement in the condition of their patient, was put forward in a manner to excite or revive hopes that were so speedily doomed to the most mournful disappointment.

The report proceeds:—"From two o'clock to six o'clock, the change for the worse was progressive, the pulse increasing to 130, and becoming gradually weaker. *Stimulants were administered, but had no apparent effect*, and the stertorous breathing became more and more painful. The relatives were now informed *that all the relief medical science could afford was exhausted*, and that no hope whatever existed of Sir Robert Peel's life being prolonged for twenty-four hours."

Thus it appears that a somewhat more vigorous treatment was at last adopted, but only when too late. The intimation to the unhappy family of the patient, that *all the relief medical*



science could afford was exhausted, sounds like a cruel mockery under the circumstances of the case, and when those who gave it, must have been most painfully conscious of how little had been done by them to prevent the fatal termination, which was then evidently approaching with giant strides.

A few hours after this, Sir Robert breathed his last.

The report in the *Times*, the materials for which have evidently been furnished by some of the professional gentlemen engaged in the case, and which may therefore be looked upon as perfectly authentic, proceeds to tell us that, "after death, an examination of the body was made, when a most important fact, *was for the first time discovered*, viz., that the fifth rib on the left side was fractured. *This was the region where Sir Robert complained of suffering the greatest pain, and it was probably the seat of the mortal injury, the broken rib pressing on the lung, and producing what is technically known as effusion and pulmonary engorgement.*

"The family were consulted on the subject of a *post mortem* examination, but both Mr. F. Peel, and Captain Peel, objected to allow the remains to be disturbed in any way, and *the precise cause of death will therefore never be ascertained.*"

Thus in this report of the *Times*, the authenticity of which, we repeat, is unquestionable; we find it distinctly admitted that the professional attendants of the deceased entertained no suspicion of the existence of a fracture of the ribs, until a cursory examination of the body *after death* revealed the lamentable fact that not only a fracture of one (or perhaps even two, according to a report in the *Lancet*) of the ribs on the left side existed, but that, in all probability, the cause of the fatal termination of the case, was mainly attributable to this fracture and its consequences.

It must be perfectly plain to every medical man of average intellect that, had this fracture been detected within a few hours after the accident, *and had a proper treatment been resorted to in consequence*, the case might possibly have had a very different termination. No wonder then that "dissatisfaction should have been expressed in some quarters, because a decisive examination of the patient was not insisted upon within a few hours after the accident, so that the extent of the injuries might have been ascertained;" and no wonder either, that remarks should have been made "respecting the slight amount of

medical and surgical treatment resorted to by his professional advisers."

These gentlemen themselves seem to have felt that some explanation of their strange conduct, in this most deplorable case, was due to the public. They have accordingly, it appears, put forward in two of our medical cotemporaries, the *Lancet* and the *Medical Times*, two most remarkable statements, the more remarkable indeed as, though evidently emanating, the one from the principal surgeon, the other from one of the physicians engaged in the case, they differ materially in some of the leading incidents, and totally in the conclusions respectively arrived at.

We will take the statement in the *Lancet* first.

The *Lancet* of July 6th, gave the subjoined account of the injuries received by Sir Robert, as far as could be ascertained:—

"As soon as surgical aid was procured, it was found that there was a comminuted fracture of the left clavicle, with considerable swelling from the first, which, together with the excruciating pain of the whole shoulder, rendered a minute examination extremely difficult. A swelling as large as the hand might cover subsequently formed below the fractured clavicle, which pulsated to the touch synchronously with the action of the heart. When examined carefully by the eye, it was found that the movement of this tumour corresponded with the contractions of the auricle, and was, in some respects, similar to the pulsations observed in the veins of the neck in very thin persons, and in certain forms of venous regurgitation. It was evident, from these signs, that some vein beneath the clavicle, probably the subclavian, had been wounded by the broken bone at the time of the fall; and that the subclavicular swelling consisted of blood effused from the wounded vessel. It was also evident, that the swelling was in this way connected with the heart, forming what might be called a diffused false venous aneurism. This was all that could be ascertained positively. Sir Robert Peel was well known to be of a gouty habit, and he was at all times extremely sensitive to physical pain. His sufferings during the whole of his brief illness were of the most agonizing kind. This might have arisen from the laceration of some of the nerves converging beneath the collar-bone, to form the axillary plexus; a complication which, as is well known, sometimes occurs from severe fractures in this situation. After death, one or two of the ribs on the left side were found to be fractured, which had not been detected during life. The injuries we have referred to would have been sufficient to cause death in such a subject; but there may possibly have been further injury, or disease, resulting from the accident, within the chest. This, however, was, as we have said, extremely difficult to make out. From consideration to the feelings and the express wishes of Lady Peel and her children, no examination of the body has taken place, so that what we have here stated is probably the sum of all that will ever be known of the cause of the death of this illustrious statesman; but upon the authenticity of what we



have now placed before them our readers may rely most implicitly."

This account was followed in the number of July 13th, by the statement just now alluded to, and which we reproduce here *in extenso*.

"Last week it was our painful duty to describe the injuries received by the late universally lamented Sir Robert Peel at the time of his fatal accident, as far as they were ascertained by his professional attendants. After reading the authentic statement which we were enabled to publish, there could be but one opinion as to the extraordinary and unusual nature of those injuries. We believe that the lesions caused by the accident present a case in surgery without a precedent. Dissatisfaction has been expressed in some quarters, because a decisive examination of the patient was not insisted upon within a few hours after the accident, so that the extent of the injuries might have been ascertained. Remarks, too, have been made respecting the slight amount of medical and surgical treatment resorted to by his professional advisers. These observations could only be made from misapprehension respecting the powers of endurance, and the constitutional peculiarities of the great statesman whose loss is so profoundly deplored. We believe his two principal attendants—Sir Benjamin Brodie and Mr. Hodgson, than whom the world could not produce more able and judicious surgeons, entertained, from the first, but little hopes of his recovery. Their apprehensions were based on a long and intimate knowledge of the physical organization and nervous temperament of the patient. Mr. Hodgson, we know, had attended Sir Robert Peel at Tamworth for upwards of thirty years, and Sir Benjamin Brodie had also enjoyed a long professional intercourse with him. It will be remembered that after the fatal accident Sir Robert Peel fainted several times before he reached his house in Whitehall-gardens, and again upon his seeing Lady Peel. His excessive sensibility to pain had always been most remarkable. Like Cicero, Demosthenes, and other renowned orators, his nervous system was so finely and delicately wrought as to render him singularly impatient and sensitive under suffering. It is probable that a more striking example of this physical and mental peculiarity was never witnessed. Only three weeks before his death, he was visiting the Zoological Gardens in the Regent's-park, with one of his daughters, when a small monkey jumped suddenly upon his hand; he immediately fainted, and remained much affected by the incident during two or three hours. On another occasion, his thumb was injured by being squeezed by the shutting of a door; and the pain, though not more than is common in such cases, caused him to faint several times in succession. With such a condition of the nervous and vascular systems, we need not wonder that serious results should have been apprehended on the late unfortunate occasion. It is not surprising that Sir Robert should have been unable to bear the ordinary bandages, or that a minute manipulation of the injured parts was not thought advisable. The question is suggested, whether the result would have been different if the sufferer had been treated like an ordinary patient in a public hospital? But to this a second question may be added. If a thorough surgical examination had been insisted upon, it is

quite possible, nay, even probable, that Sir Robert Peel might have died under the operation; or if he had not died, that the gravest complications might have arisen from the suffering and distress caused by the necessary manipulations. Of these dangers Sir Benjamin Brodie and Mr. Hodgson must have been thoroughly conscious, and we are inclined to give our full and entire concurrence of the judicious caution they observed. With one of the most valuable lives in the kingdom under their hands, they were not justified in incurring such an additional risk and danger. It would have been held as a disgrace to the profession through all time, had such a man been obviously destroyed by the *nimia diligentia*. We are sure, upon due consideration, that such would be the opinion of all surgeons of judgment and experience."

In this statement can be plainly read a tacit avowal that something more might have been done than was done, and that the life of the patient might perhaps have been preserved. Why a decisive examination was not insisted upon, and why a treatment, somewhat more in accordance with the common rule in such cases, was not resorted to—this, Sir Benjamin Brodie and Mr. Hodgson, the two principal attendants of the late Baronet, attempt to explain—(we had almost written, *excuse*)—upon the score of certain apprehensions on their part lest Sir Robert *should have died under the operation of a thorough surgical examination*; but as this assertion looks really rather *too* marinish, they add that, if he had not died under the operation, *the gravest complications might have arisen from the suffering and distress caused by the necessary manipulations*; and that, with one of the most valuable lives of the kingdom under their hands, they were not justified in incurring such an additional risk and danger. And so, not to lay themselves open to the imputation of having destroyed this precious life, by the *nimia diligentia*, these two gentlemen, than whom, the *Lancet* tells us, the world could not produce more able and judicious surgeons, permitted themselves to be deterred from making a most indispensable examination,—which, we unhesitatingly assert, they would have insisted upon making in the case of a man of humbler station, without too great a regard to the excessive sensibility to pain on the part of the sufferer,—and allowed themselves to be guided and controlled in everything by the will, wishes, and feelings of their patient. They have indeed escaped the imputation of a display of *nimia diligentia*, but they have justly laid themselves open to the far more serious doubt whether they have not left their patient to die from the injuries received by his fall, without taking any decisive and de



determined steps with a view to save him. "*Remedium anceps melius nullo*," is a very old maxim in the healing art. Sir Benjamin Brodie and the other professional attendant of the late Sir Robert Peel, seem to have thought it more judicious in his case to act upon the reverse principle—"Nullum melius accipiti remedio."

The truth of the matter is, that even the most eminent of our physicians and surgeons appear to be unable to divest themselves wholly from all rank-and-station-worship in the performance of their professional duties. The high-born and wealthy are but too often treated, by our genteel physicians, as if they were of a different clay from the humbler classes. Now this is by no means an advantage. In the case of persons of low station the medical man consults only the good of his patient, and strives to benefit him to the best of his judgment and power. In the case of the exalted and wealthy, the wishes and good pleasure of the patient are consulted rather than the true interests of his health; and, moreover, many a fashionable physician would deem it a species of high treason to treat My Lord Arthur or Sir Frederick in the same vulgar, though however so efficient manner, as he would plain Mr. Scissors the tailor. We have heard it repeatedly stated, and we believe it to be a notion rather generally entertained among the public, that a stiff glass of brandy and water and a hot blanket would have preserved the life of the late Princess Charlotte of Wales. In the case of the wife of a common tradesman these vulgar expedients would, most probably, have been resorted to under the circumstances—but in the case of a Princess! Heaven forbid!

We venture to subjoin here a brief account of one of the most remarkable surgical operations on record, which happens to be forcibly illustrative of the manner in which a great surgeon of the past, Ambrose Paré, understood and performed his duty to those who obtained his professional aid and services:—

"Some severe skirmishes and partial engagements occurred, and in one of these the Count of Aumale received a wound, probably the severest ever survived by mortal man, from the lance of an English officer. The weapon, according to the description of Ambrose Paré, entered above the right eye, declining towards the nose, and piercing through on the other side, between the nape and the ear; so violent was the blow that the weapon broke in the head, into which it had penetrated more than half a foot, the entire lance-iron, and two fingers' breadth

of the staff remaining in the wound. Paré explains the possibility of such a wound, in an age when helmet and vizor were in use, by mentioning that the Count always went into action with his face bare.

"'Terrible as was the shock,' says M. de Bouillé, 'it did not unhorse D'Aumale. He still made head against his foes, succeeded in forcing a passage through them, aided by his young and valiant brother Claude, and by De Vieilleville, who, alone of all, had not abandoned him, and rode gloriously into camp. His appearance was frightful; his face, armour, and clothes were deluged with blood. The surgeons, stupefied by the depth and gravity of the wound, despaired of cure, and refused to inflict useless sufferings upon the patient. But Ambrose Paré, the King's surgeon, sent by Francis with orders to try every means of saving the hero's life, was not discouraged. Confiding in his skill, and in the firmness of the wounded man, he resolved to attempt an operation, terrible indeed, but admirable for those days, and worthy alone to insure celebrity to him who imagined it. The lance head was broken off so short, that it was impossible to grasp it with the hand. Taking, then, a blacksmith's pincers, to draw it out with great force, and assisted, amongst others, by Master Nicolle Lavernan, a very experienced surgeon, he asked the Lorraine Prince, in presence of a crowd of officers, shuddering with horror, if he would submit to the employment of such means, and would suffer him to place his foot upon his face. 'I consent to everything: proceed,' replied D'Aumale. Nor did his fortitude abandon him for an instant during this cruel operation, which was not effected without fracture of bones, nerves, veins, and arteries, and other parts, and which he endured as if they had only pulled out a hair. The agony extorted from him but the single exclamation, 'Ah, my God!' Transported afterwards in a litter to Pecquigny, he remained for three days in a hopeless state: early on the fifth day more favourable symptoms declared themselves, and nature made such powerful efforts, that the cure was completed without leaving the Count d'Aumale any trace of this astonishing wound, except a scar, equally glorious for him and for Ambrose Paré. That skilful surgeon was wont modestly to say, when speaking of the marvellous cure of Francis of Lorraine, 'I dressed it, and God healed it.'—History of the House of Guise.—*Blackwood's Magazine*, July, 1850, pages 9 and 10.

And we may add that, even if the Count D'Aumale had refused to submit to the dreadful operation proposed by Ambrose Paré, that eminent surgeon would most probably have proceeded notwithstanding, taking his stand upon the King's orders to try every means to save the life of the heroic prince; and troubling himself very little about a phantom-apprehension of a charge of *nimia diligentia*, such as has avowedly haunted Sir Benjamin Brodie and Mr. Hodgson in the deplorable case of Sir Robert Peel.

But, for the sake of argument, we will even admit Sir Benjamin's plea. We will concede to him that Sir Robert Peel's extreme sensibility to pain opposed an insurmountable bar to a



decisive surgical examination. Why, then, we may surely ask, did not Sir Benjamin have recourse to the aid of one of the anæsthetic agents that have lately been introduced in surgical practice? We will even go farther: we will grant that a valid objection might have existed against the use of chloroform, since this agent acts directly upon the nervous centres, and its administration to a patient of Sir Robert's organization might certainly, under the peculiar circumstances of the case, have been attended with no small danger. But we maintain that the same objection could not be urged against the application of sulphuric ether—an agent, which does not act directly upon the nervous centres, but, in the first instance, upon the periphery; and by means of which, *if properly and judiciously administered*, the extremities, abdomen, and thorax may be rendered insensible to pain, and yet the brain remain unaffected. Why, we ask, was not sulphuric ether had recourse to? Upon what principle, upon what plea, can Sir Benjamin and the other gentlemen engaged in the case, defend their abstaining from the use of an agent which would have rendered the most thorough surgical examination a task of comparative facility? Alas! the answer to this question is pretty obvious. Sulphuric ether owes its introduction in surgical practice to a non-medical man. Hence, the objection to its employment; hence, the facility with which *Doctor Simpson's* doubtful offspring has been permitted to supersede it; and, hence, but too probably, also, its non-employment in Sir Robert Peel's case.

Having thus pronounced our opinion on the explanatory statement in the *Lancet*, we come now to that of its medical cotemporary. But what *can* possibly be said of the subjoined *sarrago* of mis-statements, *ex post facto* impressions, and rank nonsense to which the *Medical Times* treats its readers in the number of July 13th, "upon the highest authority."

"From the first, there was excessive prostration of the vital powers, approaching collapse, and from this the patient only rallied for a short time, to sink again. Sir Robert was at all times exceedingly susceptible of pain, and the suffering from the accident was so intense, that no minute examination of the injured parts could be made. It has been said, why was not chloroform used? For two reasons. First, because his state of extreme exhaustion forbade it; and secondly, *because the most elaborate examination could in no wise have altered the treatment.* It was ascertained that there was comminuted fracture of the clavicle, and from the first,

*fractured rib was suspected; but, though it was ascertained after death that a rib was fractured, that threw no additional light upon the symptoms, from the simple reason, that they bore no reference to such a fracture.* There was visible to the eye a large swelling under the collar-bone, which pulsed synchronously with the auricle of the heart, clearly indicating that a large vein had been wounded and was pouring out blood, which lay external to the pleura; the hand, in like manner, appreciated the pulsation of the ventricle, and proved that something unnatural was interposed between the heart and the hand, which could be nothing but blood.

"Why could not the symptoms have been caused by the fractured rib? Because there were no symptoms of effusion into the chest, or marked inflammation. Sir Robert could lie flat on his back; respiration was heard quite low down in the chest; there was no difficulty of breathing, and, *moreover, careful examination with the stethoscope and the ear satisfactorily proved, that there was no mischief going on about the lung.*

"What, then, was the actual cause of death? In all human probability, it was exhaustion from hæmorrhage; a large vein—doubtless the subclavian—had been ruptured or wounded, and had poured out blood *between the pleura and the chest*,—a diffused venous aneurism in fact: this caused the great exhaustion—the intermittent pulse—the agony of suffering—for the clot must have involved and pressed upon the axillary plexus of nerves: and it is consolatory to know, *that no human art could have averted the melancholy catastrophe, and that everything was done, which could be done.*"

The most elaborate examination would in no wise have altered the treatment!

From the first, fractured rib was suspected!

The symptoms bore no reference to a fracture of the ribs!

Death was caused by exhaustion from hæmorrhage!

No human art could have averted the melancholy catastrophe!

Everything was done which could be done!

Pshaw! It would be a lamentable waste of space to confute statements like these.

We will content ourselves, therefore, with a hint to this exceedingly ingenious Journal, that there exists a slight discrepancy between the remarkably positive and dogmatic assertion that all the distressing symptoms, and the fatal termination of the case, were attributable solely to a rupture of the subclavian vein, and consequent "exhaustion from hæmorrhage;" and the statement put forth in the number of July 6th, to the effect that "the cause of the severe bodily suffering, and of the fatal termination of the accident, remains still unascertained, because the family will not allow a *post-mortem* examination." It looks rather odd, too, that, in a case where "the most elaborate examination would



in no wise have altered the treatment," and where "no human art could have averted the melancholy catastrophe," that the learned pundit of the *Medical Times* should, in that same unfortunate number of the 6th, have "*felt bound to say, the request*" (*i. e.*, for permission to make a *post-mortem* examination of the body) "should have been conceded, for the sacred cause of humanity; for the information gained by the inspection of Sir R. Peel's remains might guide the surgeon to the successful treatment of all such accidents in future."

In conclusion, we cannot refrain from

expressing our deep regret that, at the time of the fatal accident, some one of the class of *half-educated* general practitioners—who, notwithstanding their half-education, generally manage to give proofs of a tolerable familiarity with the *practical* part of their profession—did not happen to pass the spot, rather than a graduate of the University of Glasgow; and that the treatment of the case did not fall into the hands of some practitioners less intimately acquainted with the lamented Sir Robert Peel's physical organization than Sir Benjamin Brodie and Mr. Hodgson.

## JACK STRAW;

### A CHAPTER IN THE HISTORY OF THE COMMONS OF ENGLAND.

THE other day, in my multifarious reading, I turned up the old play, tragedy, or tragi-comedy of *Jack Straw*, which appears in the British Museum catalogue under that head, and the ticket for which runs as follows:—"C.34, b.46: *Jacke Straw*, 4to., London, 1593." It led me into much rambling research on this portion of the history of the common people, during which I had occasion to notice how all our modern historians, before Macaulay, have left uncropped and unconsidered the choicest flowers of our ancient English records. Most of them take Froissart's view of this great English *Jacquerie*, and seek no farther; which is exactly as if, in future ages, the history of England were written from the reports that appear in the *Morning Post*.

Froissart was a chevalier himself, and his sympathies naturally ran with men of his own class, such as the good old knight Sir Robert Salle, who was hunted down at his own castle gate, by the Norfolk men, on their way to London.

"In their road they stopped near Norwich, and forced every one to join them, so that none of the commonalty remained behind. The reason why they stopped near Norwich was, that the governor of the town was a knight, called Sir Robert Salle; he was not by birth a gentleman, but, having acquired great renown for his ability and courage, King Edmund had created him a knight—he was the handsomest and strongest man in England. Lister (the 'King of the Commons') and his companions took it into their heads they would make this knight their commander, and carry him with them, in order to be the more feared. They sent orders to him to come out into the fields to speak with them, or they would attack and

burn the city. The knight considering it was much better for him to go to them than that they should commit such outrages, mounted his horse, and went out of the town alone, to hear what they had to say. When they perceived him coming they showed him every mark of respect, and courteously entreated him to dismount and talk with them. He did dismount, and committed a great folly; for when he had so done, having surrounded him, they at first conversed in a friendly way, saying, 'Robert, you are a knight, and a man of great weight in this country, renowned for your valour; yet, notwithstanding all this, we know who you are: you are not a gentleman, but the son of a poor mason, just such as ourselves. Do you come with us, as our commander, and we will make so great a lord of you, that one quarter of England shall be under your command.' The knight on hearing them thus speak, was exceedingly angry; he would never have consented to such a proposal; and eyeing them with inflamed looks, answered, 'Begone, wicked scoundrels, and false traitors as you are: would you have me desert my natural lord for such blackguards as you? would you have me dishonour myself? I had much rather you were all hanged, for that must be your end.' On saying this, he attempted to mount his horse; but his foot slipped from his stirrup, and his horse took fright. They then shouted out, and cried, 'Put him to death!' When he heard this, he let his horse go, and drawing a handsome Bordeaux sword, he began to skirmish, and soon cleared the crowd from about him, that it was a pleasure to see. Some attempted to close with him; but with each stroke he gave, he cut off heads, arms, feet, or legs, there were none so bold but were afraid; and Sir Robert performed that day marvellous feats of arms. These wretches were upwards of 40,000; they shot and flung at him such things, that had he been clothed in steel instead of being unarmed, he must have been overpowered, however, he killed twelve of them, besides many whom he wounded. At last he was overthrown, when they cut off his legs and arms, and his body into piecemeal. Thus ended Sir Robert Salle, which was a great pit and when the knights and squires in